

PART B - FEE(S) TRANSMITTALComplete and send this form, together with applicable fee(s), to: **Mail****Mail Stop ISSUE FEE
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Customer Number: 028524

Siemens Corporation
Intellectual Property Department
170 Wood Avenue South
Iselin, NJ 08830

APPLICATION NO.	FILING DATE	FIRST NAME INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/731,281 12.09.03 Michael B. Carter 2003P57012 US 4973

TITLE OF INVENTION:

SYSTEM AND METHOD FOR TRANSPARENCY RENDERING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
Non-provisional	NO	\$ 1510.00	\$ 300.00	\$ 1810.00	06.16.09
EXAMINER		ART UNIT	CLASS-SUBCLASS		
Nguyen, Kimbinh T.		2671	345-420000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363)

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB122) attached☐ "Fee Address" Indication (or "Fee Address" Indication form PTO/SB47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

1 Michael J. Wallace

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Siemens Product Lifecycle Management Software Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Plano

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order # of Copies _____

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-2179 (enclose an extra copy of this form)

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2)

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature Michael J. Wallace Jr.Date 06.29.09Typed or printed name Michael J. Wallace Jr.Registration No. 44,486

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